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HABERSHON, DISEASES OF THE ALIMENTARY CANAL, 16 PAGES.

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HOSPITAL NOTES AND GLEANINGS.

Vesico-Vaginal Fistula-Dr. Bozeman's Operations. So much interest is excited just now by Dr. Bozznan's suture in the treatment of vesico-vaginal fistula that it | Hospital, and with complete success, by Mr. may be well to inform our readers of the result of his practice in this country. We and the suppuration along the track of the learn from the last number of the Edinburgh Medical Journal that Dr. Bozeman operated in two cases in Edinburgh; one of these was perfectly successful; in the other case, the improvement upon Bozeman's button, by patient died of pyemin, and the fistula was substituting for it a sort of wire splint, found after death completely closed, there, which is lighter than the button, and keeps being a small suppurating point on the the parts more free both from longitudinal neighbouring mucous membrane of the and transverse movements than the clamps gow Medical Journal a case is recorded in son has already had two successful cases. which he was successful. We have only He prefers iron to silver wire. - Med. Times heard of one case in London in which he and Gas., Oct. 30, 1858.

has operated, which was at University College Hospital. This proved unsuccessful; so that of four cases, we have one death, one failure, and two cures. "His outure was tried two months ago in the perineo-plastic operation for prolapsus uteri at the Samaritan Spencer Wells. The union was perfect, deep sutures, which is sometimes so troublesome, was entirely averted. Professor Simpson has quite recently made a great er. In the last number of the Glas- or button of Sime or Boseman. Dr. Simp-

Published monthly by BLANCHARD & LEA, Philadelphia, for One Dollar a year; also, furnished GRATUITOURLY to all subscribers of the "American Journal of the Medical Sciences," who remit the Annual Subscription, Five Dollars, in advance, in which case both periodicals are sent by mail free of postage.

In no case is this periodical sent unless the subscription is paid in advance. the left side, and for the incisors, canine, conched without clicin 11 - 11 day of her

of the leg, occurring either as a specific affection or associated with ulceration, has been adopted at the Great Northern Hospital, by Mr. PRICE: The leg which presents the varicose condition is firmly encased in a bandage, which is saturated with a mixture of starch and glue. This case, when dry, offers a uniform support to the swollen vessels of the leg; and, in the course of a few days, the well-known distressing symptoms dependent upon this condition of the veins entirely, or in a great measure, disappear. When the varix is accompanied with ulceration, the same plan is adopted, but an arrangement is made so as to allow the ulcer to be treated without disturbing the case. A window, somewhat larger than the circumference of the sare or sores, is cut while the bandage is moiet. If the sore is superficial, and the affection not very chronic, it is found that the lesion is soon repaired, and that there is no occasion to leave the ulcer uncovered. This plan of treatment has, in many instances, proved not only palliative, but as effective as obliteration of the vein or veins by means of the twisted suture, while it possesses the advantage of being available in almost every instance of varicose enlargement of the superficial veins of the extremities. The bandage, when well applied, can be worn for many weeks, or even months, but the rapid subsidence of the swelling of the leg, in some instances, may require a recasing of the limb at an earlier period .- Lancet, Oct. 30,

and its extraction was accomplished without the gutta-percha reapplied a few times, until the least trouble. It included the whole of a cure is effected. We saw several cases the left side from the ramus to the symphy. of chronic disease of the hip-joint undergothe class, and it presented the sockets for at first in such an extremely irritable contwelve teeth, i. e. for the whole of those of dition that their limbs could scarcely be

Starch Bandages for Varicose Veins and and first bicuspid of the right. On the right Ulcers.-For some time past the following the necrosis did not appear to have involved method, in the treatment of varicose veins quite the whole of the alveolar border, a fact which doubtless explains in part the circumstance to which we are about to allude. Instead of coming away with the bone to which they belonged, the incisors, canine, and first bicuspid of the right side, and even the central incisor of the left, had remained in the gum. The man on the present occasion applied to have these teeth removed, as although they evidently possessed vitality, and were firmly attached to the gum, yet having no bone beneath, they were in his way rather than otherwise. The gums had of course sunk down, and the teeth stood very irregularly. Mr. Skey removed four of them, the fifth (the right first bicuspid) being sufficiently firm to justify its retention. The case excited much attention among the Surgeons of the Hospital, all of whom agreed with the operator in stating that they had never before witnessed an example of retention of vitality on the part of the teeth after removal of their osseous support. The patient is a pale, unhealthy young man of about 20. The periosteum of the bone had evidently been left behind .- Med. Times and Gaz., Oct. 30, 1858.

Gutta-Percha Moulded Splints in Diseased Hip-Joints .- On a recent visit to the Royal Orthopædic Hospital, we witnessed a plan of treatment, adopted by Mr. Brodhurst in cases of chronic disease of the hipjoint, which deserves some notice, especially as the results on the whole seem so very satisfactory. It consists in applying guttapercha, when softened by heat, over the affected hip and thigh, moulding it to the Teeth retained after Removal of part of shape of that part of the body, at whatever the Jaw .- Mr. Skay brought forward a man angle the thigh may be flexed at the time, before the students in the St. Bartholomew's and then applying a bandage over all. From operating theatre on Saturday last, whose the quiescent condition of the parts thus efcase presented some remarkable features, feeted, together with the support afforded to About four months ago he had been admit- the limb, the diseased joint becomes imted with necrosis of a large portion of the proved, and the thigh gradually assumes its lower jaw. The sequentrum was quite loose, normal position; and as this is gained, so is sis, and of the right as far as the first molar ling this method of treatment; amongst tooth. The sequestrum had been mounted them several children, in whom the disease for the museum. Mr. Skey exhibited it to had been existing some time, and who were the left side, and for the incisors, canine, touched without eliciting screams. They

have now attained their natural position; the patients can walk, and bear pressure on the limbs; their general health has improved, and they can bear a close examination.

The advantages, therefore, of gutta-percha are—that it is convenient of application; it is much cheaper than the instruments in use, with cog-wheels, dcc.; it prevents motion effectually; it keeps the parts at perfect rest, and, by acting as a support, at the same time assists nature in perfecting a cure. This is also facilitated by attention to the general health.

A few weeks back we counted, in one ward alone at St. Bartholomew's Hospital, five cases of diseased hip-joint, in boys from six to eleven years of age, under Mr. M'Whinnie's care, who at the time had charge of Mr. Lloyd's patients. All were being treated by rest and attention to the general health.—Lances, Oct. 30, 1858.

Extension Treatment of Diseased Joints. -Mr. Coore has at present under his care in St. Bartholomew's several cases in which the extension treatment is being adopted for contracted knees after disease of the joint. He does not as a rule in these cases practise tenotomy of the hamstrings. Usually he much prefers gradual extension by a screw apparatus to forcible manipulation under chloroform. We believe that the forcible method has not many advocates in the London Hospitals, as it is generally acknowledged that it lights up fresh disease in not a few cases. With regard to tenotomy, there is room for much greater difference of opinion, and many hold that the process of restoration to the straight position is greatly expedited by the timely division of the retracting hamstring tendons. At the Orthopeedic Hospital, the late Mr. Lonsdale was one who strongly held the latter view, and we believe it is still entertained by more than one of the present staff. That resections for deformity without active disease are not justifiable is certainly an opinion which is becoming more and more firmly stablished .- Med. Times and Gaz., Oct. 30, 1858.

Estirpation of the Eyeball and Eyelids for Epithelial Cancer.—An interesting case has lately occurred, under the care of Mr. White Goorer, at St. Mary's Hospital, redering necessary this formidable proceeding.

The patient was a farmer from Someraetshire, aged fifty-seven, cachectic in appearance. Nearly four years ago, his left eye became inflamed, and continued irritable. After a time, a red patch appeared near the inner canthus, and remained, despite the free use of caustic and other applications. Gradually, the whole surface of the eye became red, and the sight was lost, from the opacity of the cornea. He came twice to London for advice, the last time in the spring of this year, when a small growth had made its appearance on the free edge of the upper lid, near the punctum, and from this an adhesion extended to a similar growth on the eyeball, near the caruncle. These growths were removed, and palliative treatment adopted. For six weeks the eye remained comparatively quiet, and giving little uneasiness, but at the expiration of that time the growth from the lid began to increase rapidly, and notwithstanding that it was repeatedly removed and freely cauterized, it attained the size of a walnut. He therefore again came to London, and placed himself under Mr. White Cooper, at St. Mary's Hospital. On Sept. 25th, the parts presented the following aspect: A growth as large as a walnut sprang from the margin and inner surface of the upper eyelid, involving the caruncle, whence it spread over the surface of the eye. Its surface was ulcerated, discharged a sanious fluid, and bled on the slightest touch; consistence of a cartilaginous hardness. Two-thirds of the lid were implicated in the tumour, and the diseased structure involved not only the whole front of the eye, but the conjunctiva lining the lower lid, which was ulcerated.

The case was regarded as one of epithelial cancer, and on the 27th, Mr. Cooper proceeded to remove it: With seissors, he first detached the upper lid along the orbital margin, then dissected out the eyeball, and lastly, removed the lower lid along its orbital line. The bleeding was free, but yielded to pressure and the application of ice.

Pressure and the application of ice.

Not a bad symptom supervened, and the patient was discharged from the hospital at the end of a fortnight, the wound having healed most kindly. The disfigurement was much less than might have been expected, and was not greater than in cases where the lids have fallen in over a sunken sychall.

The characteristics of epithelial cancer were well displayed in the tumour, which

was composed of epithelial scales, many caudate and fusiform, heaped up together.

This case is one of great rarity and interest. The free extirpation practised has yielded the happiest temporary result. It will be a matter of interest to know the further progress of the case.—Lancet, Oct. 30, 1858.

Gelatial Anasthesia .- In many small operations, of a character sometimes too trivial for the administration of chloroform, we have seen the parts to be operated upon completely frozen by the application of a mixture of pounded ice and salt. This mixture, as employed, did not at all times freeze the part, because, in the irregular manner in which it had been prepared, with the presence of portions of ice nearly as large as marbles, it would almost become a solid mass, and thus its local influence on the skin or applied part was almost valueless. For the last three years, Mr. Henry Thompson has been in the habit of using a mixture of powdered ice and fine salt, the ice in all respects being of the consistence, and to some extent lightness, of snow. This very readily mixes with salt, and a mixture is obtained which produces congelation in from two to three minutes. We saw it applied over an ebecess on the left breast of a young man in University College Hospital, on the 13th instant, when in two minutes the skin became quite white and perfectly frozen. The abscess was then opened by Mr. Erichsen, and the pus flowed out, no pain whatever being felt. Now if this mixture is to be used, it should be made properly; the powdered ice can be obtained on the instant by rubbing a piece of ice along an instrument for slicing cucumbers, such as Mr. Thompson is in the habit of using, and which was employed in University College Hospital; one or two teaspounfuls of fine salt are then stirred up with the ice, the mixture put in a piece of fine muslin, and then applied to effect congelation. It is not necessary to carry the freezing process further than simply to produce whiteness of the part, when the knife may be used. We may remark that this form of gelatial ansisthesia is especially suitable for such an operation as evulsion of the toe-nail, which otherwise is exceedingly painful; and we believe that one of the recorded cases of death from chloroform occurred during the removal of a toenail .- Lancet, Oct. 30, 1858.

MENOIR.

Report on Anasthesia and Anasthetic Agents. By R. M. GLOVER, M. D., F. R. S., Edin.

No. II.—The experiments of Mr. Thos. Wakley on poisoning by chloroform.—His conclusions with regard to the occasional danger of fits use.—First fatal case near Newcastic-on-Tyne.—Report of Sir John Fife and Dr. Glover, attributing the death to chloroform.—Contrary opinion of Dr. Simpson.—Fresh experiments of Dr. Glover in support of the opinion.—Opinion of Dr. Snow.—Rapid succession of fatal cases.

Every one will recollect with what enthusiasm the new discovery was hailed; nor has the result, to almost the whole extent, disappointed these anticipations. But soon a warning voice was heard. In the Medical Gazette of December 3d, 1847, there is a letter from myself, in which, after giving the entire credit to Dr. Simpson of first applying chloroform to practice, I refer to my old experiments with liquid chloroform, and add-"When the application of ether and chloric ether to ansesthetic purposes became known, I remarked to several of my friends, that without doubt all the class of bodies on which I had formerly experimented would possess similar properties ; but was deterred from the fear of their formidable power of congesting the lungs from giving them in practice." I then go on to warn the profession that, "in some habits and cases, the use of chloroform must be attended with danger." And in the same number, in a leading article, the editor calls special attention to this warning. Many communications (controversial some of them), on various points, followed speedily in the journals, on all of which it is impossible to dwell. But the pext most important event in the history of chloroform is the publication of the experiments of Mr. Thomas Wakley, in the first number of the Lancet for 1848.

The article was entitled, "A Record of One Hundred Experiments on Animals with Ether and Chloroform, performed by Thomas H. Wakley, Esq., Surgeon to the Royal Free Hospital." In his preliminary remarks, Mr. Wakley says: "With respect, however, to the relative powers and advantages of the two agents which are now claiming from the scientific world such an intense degree of attention, facts are still

The Editor, in a note, gives the priority to Mr. Jacob. Bell, on account of the so-called chloric ether. But the reader will see how few knew what chloric ether was.

wanting to enable the profession to deter- i now incontestably proved by the dissections cases in which the one agent ought to be preferred, and the other carefully avoided." He proceeds: "These experiments were not, however, commenced until I had repeatedly observed the effects of both agents on the human constitution. I had seen ether successfully used under the most trying cirequal success. Which of the two is the best agent? Are they both equally safe? Can both be employed on all occasions? The experiments were made with small and large quantities of the substances, and all stages of the effects were witnessed, according to the relation between the largeness of the dose and the species and size and vigour of the animal. The symptoms produced by the other and chloroform were very similar; but the chloroform was found to be the more powerful and more dangerous. At first, generally, struggles and cries, increased quickness and force of respiration, which then became deep and slow, and gradually in fatal cases decreased along with the pulse." But the symptoms produced by the inhalation of chloroform and ether, both known that it is useless to describe them. sac' near the heart. Under such circum- until the muscles became rigid. It then stances of disease, and in such a condition of the lungs, a more unfortunate or dangerous remedial agent than the chloroform nessed by Dr. R. Elliott and myself."—See my experiments with the chloride of olefant gas could not have been employed. This is (Dutch liquid) on a dog, published in 1852.

mine with precision and accuracy the classes, in the instances in which death followed the characters, and description of diseases and experiments which I have just recorded. The examinations prove that blood, almost black, had collected in the heart and lungs. and the great vessels connected with those organs, to a degree of intensity which was probably never surpassed. Anything of the kind more striking probably was never witnessed in post-mortem examinations.1 cumstances. I had heard that the use of What, then, is the practical application of chloroform had been crowned with almost the facts which are thus brought under our consideration ! Why, obviously and necessarily, that when there exists any disease of the heart, any aneurism near to the heart, any threatening dyspnœa, or any tendency to an 'engorgement of the lungs,' it would be highly imprudent to recommend the inhalation of the vapour of chloroform or of other; but that in any of the abnormal conditions here described, should the practitioner determine upon employing one of the two agents in question, assuredly the more dangerous one of the two would be found in the vapour of chloroform."

At length a fatal case of chloroformization occurred. This was at Winlaton, near Newcastle-on-Tyne, in the person of a girl named Hannah Greener, aged fifteen. The case will be found reported in the Lancet of in animals and in man, are now so well Feb. 5, 1848, and fully, from the Gateshead Observer, in the Medical Gazette of the The most important part of Mr. Wakley's 11th. The girl had been operated on for paper is to be found in his general conclu-lonychia, in the Newcastle Infirmary, on sions: "The results of some of the above the 24th of October. The left great toeexperiments warrant, I think, an important nail was then successfully removed under practical application. On some points, at the influence of ether. On the 28th, Mr. least, no room remains for doubt. An ex- Meggison proceeded to remove the nail of amination of two or three facts irresistibly the great toe of the right foot for the same impels the mind to this conclusion. Only disease. This, the first fatal case, is so infour days previously to the death of that structive, that it deserves to be specially recelebrated surgeon (Mr. Liston), whose loss (corded. Mr. Meggison's statement was as is truly a national calamity, the sufferer him- follows: "I seated her in a chair, and put self, while labouring under a paroxysm of about a teaspoonful of chloroform into a dyspnoa, thought that he might possibly find tablecloth, and held it to her nose. After relief from the inhalation of the vapour of she had drawn her breath twice, she pulled chloroform. The suggestion was adopted, my hand down. I told her to draw her the vapour was administered, but necessa- breath naturally, which she did, and in rily without any beneficial result. Why about half a minute I observed the muscles necessarily? Because the post-mortem ex- of the arm become rigid, and her breathing amination exhibited lungs that were en-{a little quickened, but not stertorous. I had gorged throughout, and an 'aneurismal my hand on her pulse, which was natural

roform not having taken sufficient effect. I bold and unhesitating opinion of Sir John closed, and I opened them, and they remain- | couleur de rose with regard to chloroform, ed open; her mouth was open; and her lips {naturally caused a great sensation both and face blanched. When I opened her eyes amongst the public and in the medical they were congested. I called for water world. when I saw her face blanched, and I dashed Sir John Fife, in his evidence, stated: some of it in her face. It had no effect. I I my opinion, the cause of death was then gave her some brandy, a little of which the congestion of the lungs, and that conshe swallowed with difficulty. I then laid gestion I ascribe to the inhalation of chloher down on the floor, and attempted to roform. Of the power of chloroform to bleed her in the arm and jugular vein, but loccasion such congestion, no doubt can be only obtained about a spoonful. She was entertained, after the experiments of Mr. T. dead, I believe, at the time I attempted to Wakley and Dr. Glover on animala." Of bleed her. The last time I felt her pulse course, several controversial letters followed. was immediately previous to the blanched { Dr. Simpson attributed the death to asphyxia appearance coming on, and when she gave produced by the brandy and water, which the jerk. The time would not be more was administered while she was unable to than three minutes from her inhaling the swallow, so that, in fact, she was choked by chloroform." These are the exceedingly this fluid getting into the windpipe. Dr. well-described external symptoms of many Simpson's arguments are: 1st. The small cases of chloroform-poisoning. Mr. Lloyd quantity of chloroform administered. (But confirmed Mr. Meggison's statement.

of January to the 1st of February to admit those produced by ordinary asphyxia. (There of a post-mortem examination, and a report can be no doubt of the fact, but the question on the case by Sir John Fife and myself, is, was the asphyxia produced by chlorowho were employed for the purpose.

did not collapse, and were mottled with anesthesia, she was not in a condition to hue; the pulmonary tissue was filled with mentioned in the evidence was, I have no bloody froth, which was also found in the doubt, an attempt at breathing only, or at interior of the bronchi, mixed with mucus. breathing combined with awallowing. But On examining the larynx and traches, the it was impossible for the patient, in her weak epiglottis was observed to be reddened at and torpid state, to inspire through a medium the summit, and of a vermilion hue." The of brandy and water, any more than it would heart contained dark-fluid blood in both its have been possible to inspire if the whole cavities, very little in the left; the mem- head and face had been immersed in the branes of the brain were somewhat con- same fluid. The liquid would be partially

in accordance with our evidence: "We are breathe." The quantity of brandy and unanimously of opinion that the deceased, water was about two teaspoonfuls, and it Hannah Greener, died from congestion of seems very hard to believe that this could the lungs from the effects of chloroform, and be the cause of death. In the Lancet of that no blame can be attached to Mr. Meg. April 22, 1849, I published a series of ex-

appeared somewhat weaker-not altered in | gison, surgeon, or his assisiant, Mr. Lloyd." frequency. I then told my assistant, Mr. I had stated that I had analyzed the chloro-Lloyd, to begin the operation, which he did, form, and found it to be pure ; and that, in and took the nail off. When the semicir- my opinion, there would generally be found cular incision was made, she gave a struggle more danger from the use of chloroform in or jerk, which I thought was from the chlo- slight operations than in serious ones. This did not apply any more. Her eyes were Fife and myself at a time when all was

we shall find deaths from smaller quantities.) The inquest was adjourned from the 29th 2dly. The similarity of the appearances to form t) 3dly. He argues thus on the facts We presented a report, detailing the post- of the case : " But, with the best of motives mortem examination, and giving our con- and intentions, brandy and water was poured clusions. We found the chief morbid ap- into the girl's mouth. They were, of course, pearances in the respiratory organs. "There allowed to rest in and fill up the pharynx of was great congestion of the lungs, which the patient, as, in her state of syncope and patches of a deep purple, bluish, or scarlet swallow them. The attempt at swallowing drawn into the larynx. She rattled in her The jury returned the following verdict, throat; in a minute more she ceased to

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the two. I found the congestion and vascularity of the lungs much greater in cases of death produced by chloroform. I add: "But I believe that chloroform may kill by syncope, by its effect in stopping the heart's action, when we may have no congestion of the lungs. With regard to Professor Simpson's assertion, that the blood is always congulated in the heart in death from chloroform, fluid in asphyxia, we see that it is neither uniformly fluid nor uniformly solid in either case. Professor Simpson's statement, that reddening of the epiglottis and congestion of the brain do not occur in chloreform-poisoning, is shown to be erroneous, and no other arguments require to be stated against his assertions. He makes out, I think, that Hannah Greener was hardly properly under the influence of chloroform; but if this were the case, how came the rebe the result according to the professor's view of the cause of death." of this power."

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chloreform. In the third and concluding thirty minutes, medical assistance arrived, a very sensible one by Dr. Snow:-

"I agree with Dr. Simpson that it was fluid. not advisable to give brandy, or even water that there was syncope; but that these great points were, how to ascertain the

periments on animals, comparing the ap- | pharynx and being partially drawn into the pearances produced by drowning and chlo- larynx, seems improbable. This question, reforming, in which experiments I thought however, can only be determined by those I could detect marked differences between who observed the symptoms at the time of death, and the nature of the froth found in the bronchi afterwards; as there is nothing in the reported evidence of the appearances on dissection which might not be caused by the kind of asphyxia liable to be induced when the effects of chloroform are carried too far, and these appearances are quite incompatible with Dr. Simpson's supposition

that there was syncope.'

Next followed a fatal case at Aberdeen, where a boy, who was in the habit of inhaling chloroform for the purpose of intoxication, was one day found dead. The postmortem appearances were similar to those observed in the case of Hannah Greener. This occurred on the 8th of February. The next fatal case occurred in America, on the 23d of February. The patient was a woman of thirty-six, in excellent health, though she sometimes suffered from neuralgic pains flex phenomena of both larynx and pharynx caused by decayed teeth. On the day in to be destroyed?—which would necessarily { question, she walked three-quarters of a mile, to have four stumps extracted by a Speaking dentist. The respiratory movements apagain of the power of chloroform to produce peared to be free; chest heaving. While congestion of the lung, I add, "and the ex- inhaling chloroform from Morton's inhaler, periments of Mr. Wakley have abundantly the face became pale. In about a minute, established the reality and formidable nature } the instruments were applied, and the roots were extracted. In about two minutes from It may appear that I have dwelt too long the commencement of the inhalation, the on this remarkable case, which constitutes patient's head turned aside, the arms bean epoch in the history of chloroform. But came slightly rigid, the body drawn somealthough the controversy as to the cause of what backward, with a tendency to slide death in this case is now virtually decided from the chair, the pulse had ceased, and by the occurrence of numerous similar cases, the respiration also ceased about the same and by the unanimous voice of the profes- time. The face, previously pale, now besion, it cannot be useless to recall the inge- came livid; also the nails; the jaw dropped, nious arguments by which even such a man the tongue was protruded, and the arms beas Dr. Simpson sought to clude the admis- { came relaxed. Brandy and water, ammonia, sion of this occasionally fatal property of and the cold affusion were employed. In part of this report, after the analysis which when artificial respiration and electricity I propose to give, I shall have to consider were tried. The chief post-mortem appearthe mode in which chloroform kills. Of the ances were: Considerable congestion of the numerous letters which appeared in the lungs and of the lining membrane of the journals concerning the case of Hannah bronchi. The pleure were highly injected, Greener, I quote the following extract from and contained bloody serum. The heart was empty. The blood was everywhere

There could henceforth be no doubt of the the more so, as I do not think with him occasional fatal power of chloroform. The liquids caused suffocation, by filling up the cases in which the agent might be employ-

ed, and those in which it ought to be avoid- } ed; also the precautions to be observed in the Medical Times and Gazette for Oc. its use; also whether another agent might tober 30th last, the following statement:not be found free from its danger. There are many other subordinate topics involved, poison of the rattlesnake. M. de Vesey has showing the proportion of fatal cases. This, it was stready known, would be but small. So great a boon as the relief of pain in surgical operations could not, in the nature of things, be expected without a per contra.

In the next article, I shall proceed with the analysis of fatal cases, on which, and on the experimental inquiries already referred to, I propose to base the third division of his Report.

[Dr. Snow, in his posthumous work, just published, while agreeing with the correctness of the conclusion, that Hannah Greener was killed by chloroform, doubts how far this was due to congestion of the lungs. In the third part of this Report, this, as well as other matters connected with the physiological action of chloroform, will come under consideration, where, also, the mode of administration and other practical matters will be considered.] - Lancet, Oct. 16, 1858.

MEDICAL NEWS.

DOMESTIC INTELLIGENCE.

Yellow Fever .- This disease has now ceased as an epidemic in all our southern cities. The number of deaths in New Orleans from the disease for the five weeks ending October 24th, was 1787.

Pathological Society of Philadelphia. At the meeting of this Society, held on the 13th of October, the following officers were elected for the ensuing year :-

President .- R. La Roche, M. D. Vice-Presidents .- A. Stillé, M. D., and Ed. Hartshorne, M. D.

Treasurer .- A. Hewson, M. D. Secretary .- J. Da Costa, M. D.

Assistant-Secretary .- J. H. Brinton,

Mrs. Partington.-This discriminating lady, we are led to believe, has become a contributor to some of the medical journals; for we find in them several articles which and happy style of elucidating subjects :- literature in the United States."

Thus-we notice in an editorial article in "BIBRON is said to be an antidote for the made experiments to test the correctness of Dr. Hammond's observations, and the results are quite confirmatory of them."

A writer in a contemporary in this country seems to have been equally "exercised" by Bibron's antidote. After giving correctly the formula for its preparation, he remarks: "As no solvent is mentioned in this formula we are unable to attach any meaning to the dose of ten drops, or to tell its strength."

The writer seems not to be aware that bromine is a liquid, and we therefore state the fact for his information.

Plan for a Self-supporting Medical Literature in the United States .- It would appear from the complaints made in most of the medical journals of this country, of their receipts not meeting their actual expenses, that journalism is not so profitable as some suppose, but that it generally involves the necessity of "working for nothing and finding one's self."

Our contemporary, the Nashville Monthly Record, does not seem disposed to indulge in so expensive a luxury, and, therefore, makes the following announcement :-

"If through our failing to establish the cash principle our enterprise should turn out unremunerative, our subscribers and contemporaries may rely upon it that it will be abandoned, in justice not only to ourselves, but to the general cause of medical literature. If, therefore, any of our friends who have not paid up should fail to receive the December number, they will do well to send us two dollars, current funds, carefully enveloped; and the stream of medical chronicles will flow again. For individual subscribers the Record will cease to circulate, if, after reasonable warning, they fail to pay up within the month. For the profession generally it will terminate its existence if at the end of the year an aggregate of funds has not been remitted sufficient to pay all its expenses.

"Let all medical periodicals do the same, strongly bear the impress of her peculiar and we shall have a self-supporting medical

Conference of persons of colored and the color

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